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PTO/SB/21 (09-04)
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TRANSMITTAL	Filing	g Date	04/02/200	4		
FORM		Named Inventor	Timothy A	Timothy A.M. Chuter		
	Art U	Jnit	3731			
(As he was discoult appropriately a office init		miner Name	Not Yet K	nown		
(to be used for all correspondence after init		rney Docket Number	C010-101	9A		
Total Number of Pages in This Submission	<u> </u>				_	
	ENCLOSU	JRES (Check	all that apply)			
Fee Transmittal Form Fee Attached	15	Drawing(s) Licensing-related Papers			After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences	
Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.5	Provisi Power Chang Termin Reque CD, Ni Remarks	n to Convert to a ional Application of Attorney, Revoca e of Correspondence all Disclaimer st for Refund sumber of CD(s)andscape Table on	a Address		Appeal Proprie Status	Enclosure(s) (please Identify
SIG	ATURE OF A	PPLICANT, ATT	ORNEY, C	R AGE	NT	
Firm Name William G. Lane, Inc.,	P.C.	.1				
Signature	n ()					
Printed name William G. Lane	*	\		-		
Date Vilonoh M	12005	-	Reg. No.	24,761		
I hereby certify that this correspondence sufficient postage as first class mail in an the date shown below:	s being facsimile to		PTO or depos	ited with the		
Signature	ween!	Viena	,			
Typed or printed name Maureen Viei				1	Date	March 8,2009

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/82 (09-03)

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Application Number	10/816,780				
Filing Date	04/02/2004				
First Named Inventor	Timothy A.M. Chuter				
Art Unit	3731				
Examiner Name					
Attorney Docket Number	C010-1019A				

I hereby revoke all previous powers of attorney given in the above-identified application.						
A Power of Attorney is submitted herewith.						
OR I hereby appoint the practitioners associated with the Customer Number: 000047902						
Please change the correspondence address for the above-identified application to: The address associated with Customer Number: 000047902						
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Firm <i>or</i> Individual Name William G. Lane						
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Telephone Fax						
Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)						
SIGNATURE of Applicant or Assignee of Record						
Name Timethy A.M. Chuter						
Signature X						
Date 2/22/05 Telephone x 60 233 9854						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.						
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